and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 APR 2 5 2006 Alexandria, Virginia 22313-1450 (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate to the current correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 03/03/2006 Certificate of Mailing or Transmission *i~* John Carpenter I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Reed Smith, LLP Reference Lane Two Embarcadero Center Suite 2000 Marya lice Kelle Ė San Francisco, CA 94111 (Signature (Dat APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 09/883,693 06/18/2001 Keith S. Manson 1058 TITLE OF INVENTION: COMPUTER SYSTEM WITH NATURAL LANGUAGE TO MACHINE LANGUAGE TRANSLATOR **PUBLICATION FEE** SMALL ENTITY **ISSUE FEE TOTAL FEE(S) DUE** DATE DUE APPLN. TYPE XX YES 双翼 \$700. \$4708* \$1000. \$300 06/05/2006 nonprovisional **EXAMINER** ART UNIT **CLASS-SUBCLASS** SPOONER, LAMONT M 2654 704-009000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list John Carpenter (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, Reed Smith, LLP (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Ravenflow, Inc. Emeryville, California Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🛎 corporation or other private group entity 🔲 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Aublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2603 (enclose an extra copy of this form). Advance Order - # of Copies Change in Entity Status (from status indicated above a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the April 21, 2006 Authorized Signature John, Carpenter 39,129 Registration No. Typed or printed name This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Noder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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		Application Number	09/883,693					
TRANSMITTAL		Filing Date	June 18, 2001					
FORM	(Elin a)	First Named Inventor	Keith Manson					
(to be used for all correspondence after initial	filing)	Art Unit	2654					
		Examiner Name	Spooner, Lamont					
Total Number of Pages in This Submission	3	Attorney Docket Number	358008.00100					
	ENCLO	SURES (check all that apply)						
Fee Transmittal Form	☐ Drawin	g(s)	After Allowance Communication to Group					
Fee Attached	Licensi	ng-related Papers	Appeal Communication to Board of Appeals and Interferences					
Amendment / Reply	Petition	1	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final	_	to Convert to a onal Application	Proprietary Information					
Affidavits/declaration(s)		of Attorney, Revocation e of Correspondence Address	Status Letter					
Extension of Time Request	Termin	al Disclaimer	Other Enclosure(s) (please identify below):					
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Response to Missing Parts/ Incomplete Application								
Response to Missing Parts under 37 CFR 1.52 or 1.53								
SIGNAT	URE OF A	APPLICANT, ATTORNEY, OF	RAGENT					
Firm John Carpenter (Reg No. 36,129) Individual name Reed Smith								
Signature								
Date April 21, 2006								
	CEF	RTIFICATE OF MAILING						
I hereby certify that this certespondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.								
Typed or printed name Maryalice Kelle	у	1/ 11						
Signature Wan	18	Kel	Date April 21, 2006					
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This collection of information is required by 37 CFR 1/5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1/14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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••	PERSE TRANSMITTAL		Complete if Known	
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1	Ellective Total 2004. Patent lees are subject to annual revision.	Examiner Name	Spooner, Lamont M.	
	Effective 10/01/2004. Patent fees are subject to annual revision. TOTAL AMOUNT OF PAYMENT (\$) 1000.	Art Unit	2654	
	TOTAL AMOUNT OF PAYMENT (\$) 1000.	Attorney Docket No.	358008.00100	

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METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)								
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None ☐ Deposit Account:					3. ADDITIONAL FEES								
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE						1453 1501	1,500 1,400	2453 2501	750	Petition to revive – unintentional Utility issue fee (or reissue) 700			700
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1204 20	0 2204	100	original pate	ent		1801	790	2801	395	Request for Continu	ued Examination ((RCE)	
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**or number previously paid, if greater; For Reissues, see above						*Reduc	ed by Bas	sic Filing	Fee Pa	id SUBT	OTAL (3)	(\$)1000	
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SUBWILLIED BY				Registration No	n				\neg	Com	olete (if applicab	ne)	
Name (Print/Type) John W. Carpenter (Attorney/Agent)						39,1	29	Telephone 415-659-5927					
Signature /				· 🔏		//		/		Pate	April 21 2006		

(_	SUBMITTED BY				Complete (if applicable)		
L	Name (Print/Type)	John W. Carpenter	/Registration No. (Attorney/Agent)	39,120	Telephone	415-659-5927	
ĺ	Signature	1	1. Sunta		Date	April 21, 2006	

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